


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 5135 US															
																	
In re Application of <b>Pero Dimsoski et al.</b>																	
Application Number <b>10/723,388</b>		Filed <b>November 25, 2003</b>															
For <b>Novel Method for Isolating Single Stranded Product</b>																	
Group Art Unit <b>1632</b>	Examiner <b>To be assigned</b>	First Class Mail on <b>October 27, 2004</b>															
<p>This is a request under the provisions of 37 CFR § 1.136(a) to extend the period for filing a response in the above-identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$ <u>1,530.00</u></td></tr><tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>01-2213</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p><u>10-26-04</u> _____ Date</p> <p><u>Andrew K. Finn</u> _____ Signature</p> <p><u>Andrew K. Finn</u> <u>54,097</u> Typed or printed name Reg. No.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____	<input checked="" type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ <u>1,530.00</u>	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ _____															
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ _____															
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____															
<input checked="" type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ <u>1,530.00</u>															
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____															

BEST AVAILABLE COPY

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450. 73813\_1